

JUL 25 2005
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TRANSMITTAL FORM

Attorney Docket No.

RPS920010016US1/2031P

In re the application Randall S. SPRINGFIELD, et al.

Confirmation No: 1231

Serial No: 09/824,595

Group Art Unit: 2135

Filed: April 2, 2001

Examiner: Gyorfi, Thomas A.

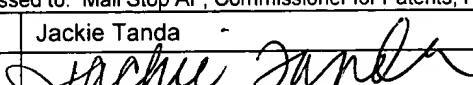
For: METHOD AND SYSTEM FOR PROVIDING A TRUSTED FLASH BOOT SOURCE

ENCLOSURES (check all that apply)					
<input type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	<input type="checkbox"/> After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input checked="" type="checkbox"/>	Notice of Appeal
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Brief
<input type="checkbox"/>	<input type="checkbox"/> Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	<input type="checkbox"/> (X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input checked="" type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosure(s) (please identify below):
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer		
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for two (2) months from June 11, 2005 to August 11, 2005.			
<input type="checkbox"/>	<input type="checkbox"/> Executed Declaration by Inventor(s)				

CLAIMS					
FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	0	0	0	\$ 50.00	\$ 0.00
Independent Claims	0	0	0	\$200.00	\$ 0.00
				Total Fees	\$ 0.00

METHOD OF PAYMENT					
<input checked="" type="checkbox"/>	Check no. <u>8853</u> in the amount of \$ <u>450.00</u> is enclosed for payment of extension of time fees.				
<input checked="" type="checkbox"/>	Charge \$ <u>500.00</u> to Deposit Account No. <u>50-3533</u> (Lenovo) for payment of fees.				
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. <u>50-3533</u> (Lenovo)				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Attorney Name	Janyce R. Mitchell, Reg. No. 40,095
Signature	/Janyce R. Mitchell/Reg.No. 40,095 Janyce R. Mitchell
Date	July 20, 2005

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 20, 2005	
Type or printed name	Jackie Tanda
Signature	

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